



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

March 13, 2015

Kim Brewster
2016 Lorton Ave
Davenport, IA 52803

Dear Kim Brewster,

This letter is in regards to the 3/11/15 compliance check of your Level B, Registered Child Development Home. Iowa Code Chapter 237A and 441 Iowa Administrative Code, Chapter 110, describes specific requirements that must be met by a Registered Child Development Home. The following areas were out of compliance at the time of my visit:

☐ 110.5(1) Conditions in the home are safe, sanitary, and free of hazards.

☐ 110.5(1)a Numbers for police, fire, ambulance, poison information posted by phone.
Need

☐ 110.5(1)a Numbers for each child's parent, physician, and a responsible person are accessible by the phone.
Need for car and home

☐ 110.5(1)c First-Aid supplies are available and easily accessible in the home, outdoor play area, any vehicle used to transport children, and on field trips.
Car- need to view

☐ 110.5(1)c The first-aid kit is sufficient to address first aid related to minor injury or trauma and stored in an area not accessible to children.
Car- need

☐ 110.5(1)f Combustible materials are kept away from furnaces, stoves, gas dryers, or water heaters.
Move pop cans by furnace

☐ 110.5(1)h A safe outdoor play area is maintained in good condition throughout the year.
Partially snow covered still – provider will access for safety prior to use.

☐ 110.5(1)j The plans shall clearly map building evacuation routes in case of fire, a safe place indoors in case of tornado, and flood shelter areas.

Need flood/evacuation plan added to front and back door plans

☐ 110.5(1)n Has a minimum of one single-station, battery-operated, UL-approved smoke detector in each child-occupied room and at the top of every stairway.

Top of basement- detector needed

☐ 110.5(1)n Each smoke detector has been installed according to manufacturer's recommendations.

☐ 110.5(1)o Nonsmoking signs posted at every entrance of the home and in every vehicle used to transport children. Signs include telephone # for reporting complaints, and www.iowasmokefreeair.gov.

Car- need to post sign.

☐ 110.5(1)v The provider has written policies about responding to health-related emergencies.

Need this written up, has talked with CCRR about this already.

☐ 110.5(2) A provider file is maintained and contains:

☐ 110.5(2)a A physician's signed statement of health and immunization status on the provider and all members of the household who may be present when children are in the home. Statements must be obtained at the time of initial registration and updated every three years.

James (Mike)- updated physical exam and immunizations status

☐ 110.5(8) Children's Files

☐ 110.5(8) An individual file is maintained for each child and updated annually or when there are changes. Each file contains:

J.M- missing full file

☐ 110.5(8)a Identifying information including, at a minimum, the child's name, birth date, parent's name, address, telephone number, special needs of the child and the parent's work address and telephone number.

C.B, I.B, C.K, R.K, B.H- update

J.M

☐ 110.5(8)b Emergency information including where the parent can be reached, the name, street address, city and telephone of the child's regular doctor, and the name number, telephone number, and relationship to the child of another adult available in case of emergency.

C.B, I.B, C.K, R.K, B.H- update ; J.M

☐ 110.5(8)c A signed medical consent from the parent authorizing emergency treatment.
C.B, I.B, C.K, R.K, B.H- update ; J.M
T.B needs date, M.B- needs date

☐ 110.5(8)d For infants and preschoolers: An admission physical examination, on the first day of attendance, including past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary. The date of the exam is not more than 12 months before the child's first day of attendance.
J.M

☐ 110.5(8)d For school-aged children: On the first day of attendance, a statement of health status signed by the parent or legal guardian.
C.B, I.B, B.H

☐ 110.5(8)e For infants and preschoolers: A statement of health signed by a physician submitted annually.
C.K, R.K, T.B, M.B

☐ 110.5(8)e For school aged children: An annual statement of health condition signed by the parent or legal guardian, annually from date of admission physical.

☐ 110.5(8)f A list signed by the parent which names persons authorized to pick up the child, their telephone number, and relationship to the child.
C.B, I.B, C.K, R.K, B.H- update ; J.M

☐ 110.5(8)g A signed and dated immunization certificate provided by the state department of public health.
J.M,

☐ 110.5(8)h For each school-age child, record of a physical exam completed at the time of school enrollment or since.
C.B, I.B, B.H

☐ 110.5(8)i Written permission from the parent(s) for their child to attend activities away from the child development home. It must include times of arrival and departure, destination, and person(s) responsible for the child.
C.B, I.B, C.K, R.K, B.H, J.M, T.B, M.B

☐ 110.5(8)j Injury report forms to document injuries requiring first aid or medical care.
Viewed but needs form for each file

Non-compliance with any of the mandated regulatory requirements listed above may lead to the cancellation or revocation of your Child Development Home Registration. **Please take whatever steps are necessary to completely address each of the violations noted above. It is essential you correct all above-mentioned violations by 4/27/15.**

☐ Based on the items out of compliance listed above, you will be required to have a recheck or follow up visit to your home. This visit will occur on or after 4/27/15.

Please do not hesitate to contact me at DHS at (563)326-8215 if you have any questions regarding this letter.

Sincerely,

Kathy Huinker
Social Worker II

MACHELLE PEZLEY
Social Worker Supervisor

Always Remember:

Child Care Resource and Referral is an excellent resource for providers to access training options and support in your area. You can reach Child Care Resource and Referral at 1-866-324-3236.

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you need to use only DHS approved training and only 12 hours can be by self-study. You can access the approved training by going to http://dhs.iowa.gov/sites/default/files/CC_Professional_Development.pdf and you can sign up for training at <http://ccmis.dhs.state.ia.us/trainingregistry/>

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes: 441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).